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012104PTO/SB/05 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032

UTILITY PATENT APPLICATION TRANSMITTAL <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		Attorney Docket No.	T3653-8771US03		
		First Inventor		Marcos TZANNES	
		Title	FAST INITIALIZATION USING SEAMLESS RATE ADAPTATION		
		Express Mail Label No.			
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Commissioner for Patents Mail Stop: Patent Application P.O. Box 1450 Alexandria, VA 22313-1450			
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i> 3. <input checked="" type="checkbox"/> Specification [Total Pages 47] <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications <i>(if applicable)</i> - Statement Regarding Fed sponsored R & D <i>(if applicable)</i> - Reference to sequence listing, a table, or a computer program listing appendix <i>(if applicable)</i> - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) <i>(35 U.S.C. 113)</i> [Total Sheets 9] 5. Oath or Declaration [Total Page 1] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) 6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies; or) ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies			
ACCOMPANYING APPLICATION PARTS					
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Nonpublication request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: <u>Terminal Disclaimer</u>					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: <u>10/459,535</u> Prior application information: <u>Examiner Lugo, David B.</u> Group / Art Unit: <u>2634</u>					
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		000181		or <input checked="" type="checkbox"/> Correspondence address below	
Name	MILES & STOCKBRIDE P.C. 1751 Pinnacle Drive				
Address	Suite 500				
City	McLean	State	VA	Zip Code	22102-3833
Country	USA	Telephone	703-903-9000	Fax	703-610-8686
Name (Print/Type)	Jason H. Vick		Registration No. (Attorney/Agent)		45,285
Signature				Date	January 21, 2004

Complete if Known

FEE TRANSMITTAL FOR FY 2003

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT **\$770.00**

Application Number	Not Yet Assigned	
Filing Date	January 21, 2004	
First Named Inventor	Marcos TZANNES	
Examiner Name	Not Yet Assigned	
Art Unit	Not Yet Assigned	
Attorney Docket No.	T3653-8771US03	

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order Other None

 Deposit Account:

Deposit Account Number

50-1165 (T3653-8771US03)

Deposit Account Name

Miles & Stockbridge, P.C.

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee Code	(\\$)	(\\$)
1001	2001	385	Utility filing fee
1002	2002	170	Design filing fee
1003	2003	265	Plant filing fee
1004	2004	385	Reissue filing fee
1005	2005	80	Provisional filing fee
SUBTOTAL (1)		\$770.00	

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

		Extra Claims	Fee from below	Fee Paid
Total Claims	2	-20** =	0 X 18	= 0
Independent Claims	2	-3* =	0 X 84	= 0
Multiple Dependent			X	=

Large Entity	Small Entity	Fee Description
Fee Code	Fee Code	(\\$)
1202	2202	18 Claims in excess of 20
1201	2201	42 Independent claims in excess of 3
1203	2203	140 Multiple dependent claim, if not paid
1204	2204	84 ** Reissue independent claims over original patent
1205	2205	9 ** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		\$0

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	
Fee Code	Fee Code	(\\$)	(\\$)
1051	2051	130	Surcharge - late filing fee or oath
1052	2052	50	Surcharge - late provisional filing fee or cover sheet
1053	1053	130	Non-English specification
1812	1812	2,520	For filing a request for <i>ex parte</i> reexamination
1804	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1805	1,840*	Requesting publication of SIR after Examiner action
1251	2251	110	Extension for reply within first month
1252	2252	420	Extension for reply within second month
1253	2253	950	Extension for reply within third month
1254	2254	1,480	Extension for reply within fourth month
1255	2255	2,010	Extension for reply within fifth month
1401	2401	330	Notice of Appeal
1402	2402	330	Filing a brief in support of an appeal
1403	2403	290	Request for oral hearing
1451	1451	1,510	Petition to institute a public use proceeding
1452	2452	110	Petition to revive - unavoidable
1453	2453	1,330	Petition to revive - unintentional
1501	2501	1,330	Utility issue fee (or reissue)
1502	2502	480	Design issue fee
1503	2503	640	Plant issue fee
1460	1460	130	Petitions to the Commissioner
1807	1807	50	Processing fee under 37 CFR 1.17(q)
1806	1806	180	Submission of Information Disclosure Stmt
8021	8021	40	Recording each patent assignment per property (times number of properties)
1809	2809	770	Filing a submission after final rejection (37 CFR 1.129(a))
1810	2810	770	For each additional invention to be examined (37 CFR 1.129(b))
1801	2801	770	Request for Continued Examination (RCE)
1802	1802	900	Request for expedited examination of a design application
Other fee (specify) _____			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Washington, DC 20231, on _____.

Name: _____

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Signature	Registration No. (Attorney/Agent)	45,285	Telephone 703-903-9000
Jason H. Vick		Date	January 8, 2004	